### RESOLUTION NO. 2011-01

PHA Certifications of Compliance with the PHA Plans and Related Regulations:

Board Resolution to Accompany the Standard Annual, Standard 5-Year/Annual, and

Streamlined 5-Year/Annual PHA Plans

Acting on behalf of the Board of Commissioners of the Public Housing Agency (PHA) listed below, as its Chairman or other authorized PHA official if there is no Board of Commissioners, I approve the submission of the standard Annual, x standard 5-Year/Annual or streamlined 5-Year/Annual PHA Plan for the PHA fiscal year beginning April 1, 2011, hereinafter referred to as "the Plan", of which this document is a part and make the following certifications and agreements with the Department of Housing and Urban Development (HUD) in connection with the submission of the Plan and Implementation thereof:

- 1. The Plan is consistent with the applicable comprehensive housing affordability strategy (or any plan incorporating such strategy) for the jurisdiction in which the PHA is located.
- 2. The Plan contains a certification by the appropriate State or local officials that the Plan is consistent with the applicable Consolidated Plan, which includes a certification that requires the preparation of an Analysis of Impediments to Fair Housing Choice, for the PHA's jurisdiction and a description of the manner in which the PHA Plan is consistent with the applicable Consolidated Plan.

  3. The PHA has established a Resident Advisory Board or Boards, the membership of which represents the residents assisted by the PHA, consulted with this Board or Boards in developing the Plan, and considered the recommendations of the Board or Boards (24 CFR 903.13). The PHA has included in the Plan submission a copy of the recommendations made by the Resident Advisory Board or Boards and a description of the manner in which the Plan addresses these recommendations.
- 4. The PHA made the proposed Plan and all information relevant to the public hearing available for public inspection at least 45 days before the hearing, published a notice that a hearing would be held and conducted a hearing to discuss the Plan and invited public comment.
- 5. The PHA will carry out the Plan in conformity with Title VI of the Civil Rights Act of 1964, the Fair Housing Act, section 504 of the Rehabilitation Act of 1973, and title II of the Americans with Disabilities Act of 1990.
- 6. The PHA will affirmatively further fair housing by examining their programs or proposed programs, identify any impediments to fair housing choice within those programs, address those impediments in a reasonable fashion in view of the resources available and work with local jurisdictions to implement any of the jurisdiction's initiatives to affirmatively further fair housing that require the PHA's involvement and maintain records reflecting these analyses and actions.
- 7. For PHA Plan that includes a policy for site based waiting lists:
- The PHA regularly submits required data to HUD's MTCS in an accurate, complete and timely manner (as specified in PIH Notice 99-2);
- The system of site-based waiting lists provides for full disclosure to each applicant in the selection of the development in which to reside, including basic information about available sites; and an estimate of the period of time the applicant would likely have to wait to be admitted to units of different sizes and types at each site;
- · Adoption of site-based waiting list would not violate any court order or settlement agreement or be inconsistent with a pending complaint brought by HUD;
- · The PHA shall take reasonable measures to assure that such waiting list is consistent with affirmatively furthering fair housing;
- The PHA provides for review of its site-based waiting list policy to determine if it is consistent with civil rights laws and certifications, as specified in 24 CFR part 903.7(c)(1).
- 8. The PHA will comply with the prohibitions against discrimination on the basis of age pursuant to the Age Discrimination Act of 1975.
- 9. The PHA will comply with the Architectural Barriers Act of 1968 and 24 CFR Part 41, Policies and Procedures for the Enforcement of Standards and Requirements for Accessibility by the Physically Handicapped.
- 10. The PHA will comply with the requirements of section 3 of the Housing and Urban Development Act of
- 1968, Employment Opportunities for Low-or Very-Low Income Persons, and with its implementing regulation at 24 CFR Part 135.
- 11. The PHA has submitted with the Plan a certification with regard to a drug free workplace required by 24 CFR Part 24, Subpart F.
- 12. The PHA has submitted with the Plan a certification with regard to compliance with restrictions on lobbying required by 24 CFR Part 87, together with disclosure forms if required by this Part, and with restrictions on payments to influence Federal Transactions, in accordance with the Byrd Amendment and implementing regulations at 49 CFR Part 24.

- 13. The PHA will comply with acquisition and relocation requirements of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 and implementing regulations at 49 CFR Part 24 as applicable.
- 14. The PHA will take appropriate affirmative action to award contracts to minority and women's business enterprises under 24 CFR 5.105(a).
- 15. The PHA will provide HUD or the responsible entity any documentation that the Department needs to carry out its review under the National Environmental Policy Act and other related authorities in accordance with 24 CFR Part 58.
- 16. With respect to public housing the PHA will comply with Davis-Bacon or HUD determined wage rate requirements under section 12 of the United States Housing Act of 1937 and the Contract Work Hours and Safety Standards Act.
- 17. The PHA will keep records in accordance with 24 CFR 85.20 and facilitate an effective audit to determine compliance with program requirements.
- 18. The PHA will comply with the Lead-Based Paint Poisoning Prevention Act and 24 CFR Part 35.
- 19. The PHA will comply with the policies, guidelines, and requirements of OMB Circular No. A-87 (Cost Principles for State, Local and Indian Tribal Governments) and 24 CFR Part 85 (Administrative Requirements for Grants and Cooperative Agreements to State, Local and Federally Recognized Indian Tribal Governments.).
- 20. The PHA will undertake only activities and programs covered by the Plan in a manner consistent with its Plan and will utilize covered grant funds only for activities that are approvable under the regulations and included in its Plan.
- 21. All attachments to the Plan have been and will continue to be available at all times and all locations that the PHA Plan is available for public inspection. All required supporting documents have been made available for public inspection along with the Plan and additional requirements at the primary business office of the PHA and at all other times and locations identified by the PHA in its PHA Plan and will continue to be made available at least at the primary business office of the PHA.

_JACE	CSON HOUSING COMMISSION	<u>MI038</u>
	PHA Name PHA	Number/HA Code
<u>X</u>	Standard PHA Plan for Fiscal Year: 2011 Standard Five-Year PHA Plan for Fiscal Years 20	12 - 2015 including Annual Plan for FY 2011
	Streamlined Five-Year PHA Plan for Fiscal Years	20 20, including Annual Plan for FY 20
l hereby prosecule	certify that all the information stated herein, as well as any information provide I false claims and statements. Conviction may result in criminal and/or civil p	led in the accomposiment herewith, is true and accurate, Warning: HUD will enalties. (18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)
Name of A	Authorized Official	TIUa .
Kather	ine A. Martin	President
Signature		Dale
X∦	Katherine a Stant	January 12, 2011

PHA 5-Year and	U.S. Department of Housing and Urban	OMB No. 2577-0226
1	Development	Expires 4/30/2011
Annual Plan	Office of Public and Indian Housing	

1.0	PHA Information								
ļ	PHA Nume: Jackson Housing Commission PHA Code: M1038 PHA Type: Smull High Performing Stundard HCV (Section 8)								
1	PHA Fiscal Year Beginning: (MM/YYYY): 04/01/2011								
	The second secon								
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above)								
	Number of PH units: 543 Number of HCV units: 475								
3.0	Submission Type  Solution 5-Year and Annual Plan								
	Z 3-100 Mid Annual 1301 C Annu								
4.0	PHA Consortin								
	PHA Program(s) Included in the Programs Not in the Programs								
	Purticipating PHAs Code Consortia Program Consortia Ph HCV								
	PHA 1; PHA 2;								
	PHA 3:								
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.								
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's								
	jurisdiction for the next five years;								
1	The mission of the JHC is:								
Ļ	The Mission of the Arc is.								
1	To assist low income families secure safe, decent and affordable housing; create opportunities for resident and participant families to								
	nebieve self sufficiency and economic independence; and assure fiscal and program integrity by all program participants.								
1									
L	The state of the s								
5.2	Gan's and Objectives. Identify the PHA's quartifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals								
1	and objectives described in the previous 5-Year Plan.								
	and digented acceptance of the control of the contr								
1	To achieve the mission statement we will:								
1									
1	<ul> <li>Recognize public housing Residents and Section 8 program participants as our ultimate customers;</li> </ul>								
	<ul> <li>Continually improve Commission management and service delivery efforts through program assessments and revision, and</li> </ul>								
	Continually improve Commission management and service derivery efforts utrough program assessments and revision, and selection and professional development of highly skilled and results oriented personnel.								
1	selection and brotessional descriptment of mignity artified and teads of leased betachnest								
	Seek and maintain problem-solving partnerships with Resident and program participant families, community, and								
	government leadership.								
1									
	<ul> <li>Efficiently apply limited Commission resources to assure optimum program results.</li> </ul>								
1									
<del></del>	PHA Plan Update								
	1								
	(a) Identify all PHA Han elements that have been revised by the PHA since its last Annual Plan submission:								
	l								
6.0	None,								
1	(b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA								
	Plan elements, see Section 6.0 of the instructions.								
1									
	Jackson Housing Commission main office at 301 Steward Avenue, Jackson, Mt 49201-1132								
1	Chulet Terrace Management Office at 316 Burberry Drive, Jackson, MI 49203 Reed Manor Management Office at Building C, 301 Steward Avenue, Jackson, MI 49201-1132								
	Shahan-Blackstone North Apartments Management Office, 109 Shahan Drive, Jackson, MI 49202								
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Dispusition, Conversion of Public Housing, Homeownership								
''''	Programs, and Project-based Vouchers. Include statements related to these programs as applicable.								

8.0	Capital Improvements. Please complete Parts & I through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the Capital Fund Program Annual Statement/Performance and Evaluation Report, form HUD-50075.1, for each current and open CFP grant and CFFP financing.
	2010, 2009, 2009 Stimulus (ARRA), 2008, 2007, Annual Statement and Performance Reports as of 09/30/2010
8,2	Capital Fund Pragram Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the Capital Fund Program Five-Year Action Plan, form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan.
	2011-2015 Five-Year Action Plan
8,3	Capital Fund Financing Program (CFFP),  Check if the PHA proposes to use my portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.

Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tepant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location.

### 1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type								
Family Type	Oyerall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion	
Income <= 30% of AMI	3,203	5	5	5	3	3	2	
Income >30% but <=50% of AMI	1,852	5	5	5	3	3	2	
Income >50% but <80% of AMI	3,015	4	4	4	3	3	2	
Elderly	2,219	5	5	4	3	2	4	
Families with Disabilities	600	5	5	4	4	3	4	
Ruce/Ethnicity W	4,940	5	j j	5	3	3	2	
Race/Ethnicity B	2,963	5	5	5	3	3	2	
Ruce/Ethnicity I	103	5	5	5	3	3	2	
Race/Ethnicity A	64	5	5	5	3	3	2	

Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the walting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Need: Shortage of affordable housing for all eligible populations Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by: **NONN** Employ effective maintenance and management policies to minimize the number of public housing units off-line Reduce turnover time for vacated public housing units Reduce time to renovate public housing units Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of meas of minority and poverty concentration Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program Participate in the Consolidated Plan development process to ensure coordination with broader community strategies Strategy 2: Increase the number of affordable housing units by: Apply for additional section 8 units should they become available Need: Specific Family Types: Families at or below 30% of median Strategy 1: Target available assistance to families at or below 30 % of AMI Adopt rent policies to support and encourage work Need: Specific Family Types: Families at or below 50% of median Strategy 1: Target available assistance to families at or below 50% of AMI Adopt rent policies to support and encourage work Need: Specific Family Types: Families with Disabilities Strategy 1: Turget available assistance to Families with Disabilities: Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing Affirmatively market to local non-profit agencies that assist families with disabilities, (e.g. DisAbility Connections) Need: Specific Family Types: Races or ethnicities with disproportionate housing needs Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate aceds: Affirmatively market to races/ethnicities shown to have disproportionate housing needs Strategy 2: Conduct activities to affirmatively further fair housing Market the section 8 program to owners outside of areas of poverty /minority concentrations (2) Reasons for Selecting Strategies Funding constraints NXXX Staffing constraints Extent to which particular housing needs are met by other organizations in the community Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA 区区 Influence of the housing market on PHA programs

9.1

Community priorities regarding housing assistance

Additional Information. Describe the following, as well as any additional information HUD has requested.

(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the S-Year Plan.

The JHC has been able to maintain its mission to promote adequate and affordable housing, economic opportunity and a suitable living environment free from unlawful discrimination through the utilization of Capital funds and application of our public housing policies. However, the Commission was determined to be fiscally "troubled" after fiscal year 2008. The Commission has entered into a Memorandum of Agreement with the HUD-Detroit Field Office to correct the problems that led to this designation.

Under the Memorandum of Agreement, and with renewed commitment by the Commission, it's Staff, and the help of the City of Jackson, and other ancillary organizations, the Commission will address public housing vacancies and other problems noted, aggressively, and our PHAS and SEMAP scores will demonstrate improvement; and other operational issues have been positively addressed. There are a few remaining goals to be achieved, however, that will be addressed under a new Memorandum of Agreement which the Commission has yet to receive.

Cupital funds have been utilized to provide modernization of our properties and the 2011 application will continue that effort,

JHC has implemented local preferences to improve the living environment by de-concentration, promoting income mixing, and improving security throughout our developments.

We are confident that the JHC will be able to continue to improve to meet and accommodate all our goals and objectives for FFY 2011

(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"

A. Substantial Deviation from the 5 Year Plan.

10.0

The Commission's Definition of Substantial Deviation and Significant Amendment or Modification is as follows:

· Changes to rent or admissions policies or organization of the waiting list.

- Additions of non-emergency work items (items not intended in the current 5 Year Action Plan) or a change in use of replacement reserve funds under the Capital Fund Program; and
- · Any change with regard to demoiltion or disposition, designation, home ownership programs or conversion activities.
- B. Significant Amendment or Modification to the Annual Plan.

The Commission's Definition of Substantial Deviation and Significant Amendment or Modification is as follows:

Changes to rent or admissions policies or organization of the waiting list.

- Additions of non-emergency work items (items not intended in the current 5 Year Action Plan) or a change in use of replacement reserve funds under the Capital Fund Program; and
- Any change with regard to demolition or disposition, designation, home ownership programs or conversion activities.

Memorandum of Agreement (MOA) Statement

The Commission is working diligently to meet the goals and timetables as set forth in its Memorandum of Agreement. Most recently the Commission has:

1. Enacted and implemented more aggressive rent collection procedures to reduce TAR's.

2. Adopted a collection loss policy that writes off uncollected accounts receivable monthly that when they become six months old.

 Improved and maintained tenant occupancy to 98%+ in each AMP. With the excellent occupancy rate we find it no longer necessary to hire outside contractors to assist in unit renovation, reducing overall expenses.

4. Reduced overall vacantumit turn around time from 65+ days to 35+ days. We continue to strive toward the goal 25 days turn-around time at each AMP

5. The Commission is operating with healthy reserves in both its Section 8 and low income rental programs.

6. Reviewed and updated critical operational policies and procedures.

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged, Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
  - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)

(b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP gants only)

(c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)

(d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)

- (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
- (f) Resident Advisory Bourd (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.

(g) Challenged Elements

(ii) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)

(i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

#### ATTACHMENTS

### VIOLENCE AGAINST WOMEN ACT (VAWA)

THE VAWA STATUTE AND FEDERAL REGISTER DATED MARCH 16, 2007, ENTITLED "THE VIOLENCE AGAINST WOMEN AND DEPARTMENT OF JUSTICE REAUTHORIZATION ACT OF 2005; APPLICABILITY TO HUD PROGRAMS, PAGE 12697 A., "PUBLIC HOUSING AGENCY PLANS" STIPULATES THAT THE PHA INCLUDE IN THE ANNUAL PLAN A DESCRIPTION AS ACTIVITIES, SERVICES OR PROGRAMS TO BE OFFERED BY AN AGENCY, EITHER DIRECTLY OR IN PARTNERSHIP WITH OTHER SERVICE PROVIDERS TOWARDS CHILD OR ADULT VICTIMS OF DOMESTIC VIOLENCE, DATING VIOLENCE, SEXUAL ASSAULT OR STALKING.

The Jackson Housing Commission (JHC) has adopted a policy (the "JHC VAWA Policy") to implement applicable provisions of the Violence Against Women and Department of Justice Reauthorization Act of 2005 (Pub. L. 109-162) (VAWA). JHC's goals, objectives and policies to enable JHC to serve the needs of child and adult victims of domestic violence, dating violence and stalking, as defined in VAWA, are stated in the JHC VAWA Policy, a copy of which was provided as an attachment in last year's PHA Plan. In addition, JHC shall operate programs to serve the needs of child and adult victims of domestic violence, dating violence and stalking as and to the extent such programs are described from time to time in JHC's Annual Public Housing Agency Plan.

In this fiscal year the Commission shall enter into a Memorandum of Agreement with the Jackson County area's principle domestic abuse/sexual assault shelter, The AWARE Shelter, to further the achievement of its goals as outlined in its VAWA policy.

# Jackson Housing Commission Jackson, Michigan Resident Advisory Board

### FYE 03/31/11

Chalet Terrace

Patricia Davis, President, CTRC

1233 Heather Lane, Jackson, MI 49203

Mary Williams, Vice President, CTRC 1227 Heather Lane, Jackson, MI 49203

Sheila Reynolds, Treasurer, CT Resident Council 1203 Laurel Lane, Jackson, MI 49203

Tanja Holmes, Secretary, CT Resident Council 1202 Heather Lane, Jackson, MI 49203

Reed Manor

C. Jean LaFountain, Resident Housing Commissioner

428 Wildwood Ave., A-08 Jackson, MI 49201

Terry Williams, Vice President, RM Resident Council

207 Steward Avenue, H-41

Jackson, MI 4901

Idella Oliver, Secretary, RM Resident Council 207 Steward Avenue, H-19 Jackson, MI 49201

Shahan-Blackstone Mr. and Mrs. Gerald Barker, Resident Representatives 355 Moorman Drive, Jackson, MI 49202

> Linda Enyart, Resident Representative 104 Shahan Drive, Jackson, MI 49202

The Resident Advisory Board was in general agreement with and in support of the policies and Agency Plan documents. Specific requests and comments included replacement of window screens and installation of ceiling lights at Shahan-Blackstone with a more secure type. Shahan-Blackstone again noted they would like to develop a computer lab at its development like the Ayieko Resource Center at Chalet Terrace. Reed Manor would like to see exterior lot lights restored, especially on Van Buren Street; the intercom system rehabilitated: and replacement of closet doors in B and I Buildings. They also would like to see some form of computer availability for resident training and amusement. Shahan-Blackstone representatives suggested installing self cleaning ovens; replacement of bi-fold closet doors with the sliding type; and ceiling light fixtures at handicapped/disabled units. Chalet Terrace residents are aggressively seeking establishment of a day care center in the now unused Head Start building. All developments requested installation of exterior surveillance systems, and Reed Manor requested interior surveillance. All requests will be considered under current projects in the Commission's Capital Fund Programs.

Public Hearing January 12, 2010:

No comments.

### Certification for a Drug-Free Workplace

U.S. Department of Housing and Urban Development

Applicant Name					
Jackson Hausing Commission	301 Steward Avenue				
Jackson Housing Commission Program/Activity Receiving Federal Grant Funding:	Jackson, MI 49201-1132				
t inframily isoppaing topical clarify ground.					
Capital Fund Program - 2011					
Acting on behalf of the above named Applicant as its Authorized Offici					
of Housing and Urban Development (HUD) regarding the sites listed below					
I certify that the above named Applicant will or will continue to	615 Alica to a Bit and a to t				
provide a drug-free workplace by:	(1) Abide by the terms of the statement; and				
hraving a mag-nec workhade of.	(2) Notify the employer in writing of his or her conviction for				
a. Publishing a statement notifying employees that the unlawful	a violation of a criminal drug statute occurring in the workplace no				
manufacture, distribution, dispensing, possession, or use of a controlled	later than five calendar days after such conviction;				
substance is prohibited in the Applicant's workplace and specifying the	·				
actions that will be taken against employees for violation of such	e. Notifying the agency in writing, within ten calendar days				
prohibition.	after receiving notice under subparagraph d.(2) from an employee				
	or otherwise receiving actual notice of such conviction. Employers				
b. Establishing an on-going drug-free awareness program to inform	of convicted employees must provide notice, including position				
emplayees —	title, to every grant officer or other designee on whose grant activity				
(1) The dangers of drug abuse in the workplace;	the convicted employee was working, unless the Federal agency has				
(1) The sampers of each about it are workplace;	designated a central point for the receipt of such notices. Notice				
(2) The Applicant's policy of maintaining a drug-free	shall include the identification number(s) of each affected grant;				
workplace;	.,				
	f. Taking one of the following actions, within 30 calendar days				
(3) Any available drug counseling, rehabilitation, and	of receiving notice under subparagraph d.(2), with respect to any				
employee assistance programs; and	employes who is so convicted				
(A) The soulding that more had been added to be sould be a first to be a	(1) Taking and interest and an interest and				
(4) The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace.	<ol> <li>Taking appropriate personnel action against such an employee, up to and including termination, consistent with the</li> </ol>				
ting thing vitigiting decirring in the workplace,	requirements of the Rehabilitation Act of 1973, as amended; or				
<ul> <li>Making it a requirement that each employee to be engaged in</li> </ul>					
the performance of the grant be given a copy of the statement required	(2) Requiring such employee to participate satisfactorily in				
by paragraph a.;	a drug abuse assistance or rehabilitation program approved for such				
·	purposes by a Federal, State, or local health, law enforcement, or				
d. Notifying the employee in the statement required by paragraph	olher appropriate agency;				
a. that, as a condition of employment under the grant, the employee	act the property of the party of				
will	g. Making a good faith effort to continue to maintain a drugfree workplace through implementation of paragraphs a, thru f.				
2. Sites for Work Performance The Applicant shall list (on seperate pages) the site(s) for the					
shown above: Place of Performance shall include the street address, city, county, Sin					
program/activity receiving grant funding.)					
Development Development Street No. Name Address	State/ Program City County Zip Activity				
MI33P03B001 Chalet Terrace 316 Barberry Drive	Jackson Jackson MI 49203 Public Housing				
MI33P038002 Reed Manor 301 Steward Avenue	Jackson Jackson MI 49201 Public Housing				
MI33P038003 Shahan-Blackstone 109 Shahan Drive	Jackson Jackson MI49202 Public Housing				
Check here if there are workplaces on file that are not identified or	the attached sheets.				
I hereby certify that all the information stated herein, as well as any information pa	ovided in the accompaniment herewith, is true and accurate.				
Warning: HUD will prosecute false claims and statements. Conviction may					
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)  Name of Authorized Official:	Nie:				
	nterim Director				
Flanching	Date:				
X Donita & Olson	January 12, 2011				

### **Certification of Payments** to Influence Federal Transactions

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

Applicant Name		
Jackson Housing Commission		
301 Steward Avenue		
Jackson, MI 49201-1132		
Program/Activity Receiving Federal Grant Funding		
Capital Fund Program- 2011		
The undersigned certifies, to the best of his or her knowledge and be		•
<ol> <li>No Federal appropriated funds have been paid or will be paid, by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the awarding of any Federal Contract, the making of any Federal grant, the making of any Federal loan, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any Federal contract, grant, loan, or cooperative agreement.</li> <li>If any funds other than Federal appropriated funds have been paid or will be paid to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with this Federal contract, grant, loan, or cooperative agreement, the undersigned shall complete and submit Standard Form-LLL, Disclosure Form to Report Lobbying, in accordance with its instructions.</li> </ol>	(3) The undersigned shall require that be included in the award documents (including subcontracts, subgrants, and and cooperative agreements) and that disclose accordingly. This certification is a material represent was placed when this transaction was of this certification is a prerequisite transaction imposed by Section 1352, who fails to file the required certification penalty of not less than \$10,000 and a such failure.	the language of this certification of for all subawards at all tiers and contracts under grants, loans, all subrecipients shall certify and tation of fact upon which reliance made or entered into. Submission for making or entering into this Title 31, U.S. Code. Any personation shall be subject to a civil
I hereby certify that all the information stated herein, as well as any Warning: HUD will prosecute false claims and statements. Convic		
(18 U.S.C. 1001, 1010, 1012; 31 U.S.C. 3729, 3802)  Name of Authorized HA Official:	Title:	
Name of Authorized DM Official:	- 1105.	
Donita G. Olson, PHM, SHM	Interim Director	
Signature:		Dale:
* Donita & Olson		01/12/2011
Previous edition is obsolete	ref. Handbo	form HUD 50071 (3/98) 30ks 7417.1, 7475.13, 7485.1, 27485.3

Disclosure of Lobbying Activities

Complete this form to disclose lobbying activities pursuant to 31 U.S.C. 1352

(See reverse side for instructions and public burden disclosure.)

Approved by OMB 0348-0046

1. Type of Federal Action:	2. Status of Federal Action:		3. Report Type:	<del>,</del>		
s. contract b. grant c. cooperative agreement d. loan e. loan guarantee	b. initial award c. post-award	d .		a. Initial filing b. material change For Material Change Only; Year::::::::::::::::::::::::::::::::::::		
f. lean Insurance  4. Name and Address of Reporting Entity:  Subawardee Tier  Jackson Housing Commission  301 Steward Avenue:  Jackson; MI 49201-1/32	, if known:	Prime:		wardee, enter Name and Address of		
Congressional District, If known: 7  6. Federal Department/Agency: U.S.: Department of Housing and Urban D	Development ::	7. Federal Program Gapital Fund	il District, if known:  n Name/Description;  Program-2011;  ber, if applicable;	:14:850		
8. Federal Action Number, if known:		9. Award Amou \$		77(8,662		
10a, Name and Address of Lobbying Registrant (If Individual, last name, first name, MI):		different fro	rforming Services (Ir Im No. 10a) first name, MI):			
16. Information requested through this form is a section 1352. This disclosure of lobbying activities the fact upon which reliance was placed by the above who rentered into. This disclosure is required pursuant information will be reported to the congress sention public inspection. Any person who falls to file the subject to a civil penalty of not less than \$10,000 are each such failure.	s a material represen- tation of nen this transaction was made it to 31 U. S. C. 1352. This ilannually and will be avallable le required disclosure shall be	Print Name: Title:	Dornd Donita G. Olson, F Interim Director (517) 787-9241	Date:01/12/2011		
Federal Use Only				Authorized for Local Reproduction Standard Form-LLL (Rev. 7-97)		

### **JACKSON HOUSING COMMISSION**

301 Steward Avenue, Jackson Michigan 49201-1132

Telephone: Area Code 517-787-9241 FAX:

517-787-6143

517-787-1188

TDD/TTY:

1-800-545-1833 Ext. 879

Public Housing Programs: Section 8 Programs: Homeownership Program:

517-787-6140 517-787-6496

January 12, 2011

Willie C. Garrett, Director, OPH U.S. Department of Housing and Urban Development Michigan State Office Patrick V. McNamara Federal Building Detroit, Michigan 48226-2592

Dear Mr. Garrett:

Certification of Units Re:

The Jackson Housing Commission hereby certifies that it administers programs for and maintains 543 public housing units in three Asset Management Projects and 475 Housing Choice Vouchers located in the City of Jackson, Jackson County, Michigan.

Thanks for your continued support of our vital housing assistance programs.

Sincerely,

JACKSON HOUSING COMMISSION

Donita G. Olson, PHM, SHM Interim Executive Director

Donita D. alson

PHA Plan Binder CC.

Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

U.S. Department of Housing and Urban Development
Office of Public and Indian Housing
Expires 4/30/2011

## Certification by State or Local Official of PHA Plans Consistency with the Consolidated Plan

I,	Karen F. Dunigan	the _	Mayor		certify	that	the	Five	Year	and
Annual	PHA Plan of the	Jackson Hous	sing Commission	is consiste	ent with	the C	ons	olidate	ed Pla	n of
the City	of Jackson, Michig	an, prepare	d pursuant to 24	CFR Part	91.					

Signed / Dated by Appropriate State or Local Official

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No.	2577-0226
 Expires	4/30/2011

Part I: S	ummary						
PHA Nam	PHA Name:  Jackson Housing Commission  Grant Type and Number  Capital Fund Program Grant No: M133P03850111  Replacement Housing Factor Grant No:  Date of CFFP:						
⊠ Origin ☐ Perfor	Type of Grant  Original Annual Statement As of 01/12/2011 Reserve for Disasters/Emergencies Revised Annual Statement (revision Performance and Evaluation Report for Period Ending;						
Line	Summary by Development Account		timated Cost		otal Actual Cost 1		
1	Total non-CFP Funds	Original	Revised <sup>1</sup>	Obligated	Expended		
1	<u> </u>				:		
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	143,730					
3	1408 Management Improvements	8,822					
4	1410 Administration (may not exceed 10% of line 21)	-					
5	1411 Audit						
6	1415 Liquidated Damages						
7	1430 Fees and Costs	39,450					
B	1440 Site Acquisition						
9	1450 Site Improvement	42,050					
10	1460 Dwelling Structures	334,170					
11	1465.1 Dwelling Equipment—Nonexpendable						
12	1470 Non-dwelling Structures	150,440					
13	1475 Non-dwelling Equipment						
14	1485 Demolition						
15	1492 Moving to Work Demonstration						
16	1495.1 Relocation Costs						
17	1499 Development Activities 4	'					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

						1107/1017 C2 4/20/2011
Part I: Si	ummary					
PHA Nume Jackson II Commissio	ousing	Grant Type and Number Capital Fund Program Grant No: M133P03850111 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant Approval: 2011	
	al Annual S	Statement As of 07/15/2011	asters/Emergencies		rised Annual Statement (revision no: al Performance and Evaluation Report	)
Line	Summar	y by Development Account	Total Estin	nated Cost	Total	Actual Cost 1
			Origiaal	Revised :	Obligated	Expended
180	1501 Cal	leteralization or Debt Service paid by the PHA				
18ba	9000 Col	lateralization or Debt Service paid Via System of Direct Payment				
19	1502 Cor	ningency (may not exceed 8% of line 20)				
20	Amount	of Annual Grant: (sum of lines 2 - 19)	718,662			
21	Amount	of line 20 Related to LBP Activities				
22	Amount	of line 20 Related to Section 504 Activities				
23	Amount	of line 20 Related to Security - Soft Costs				
24	Amount	of line 20 Related to Security - Hard Costs				
25	Amount	of line 20 Related to Energy Conservation Measures				
Signatu	re of Inte	erim Director: Donita G. Olson, PHM, SHM  a. & Olson	Date 01/12/2011   Signatu	re of Public Ho	ousing Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

PHA Name:	Cn	Grant Type and Number Capital Fund Program Grant No: MI33P03850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2011			
Jackson Housing Commi	SSION CF. Rej								
Development Number Name/PHA-Wide Activities	General Description of Major Wor Categories	k Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Total Actual Cost		
· ratif Allos				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 1	A. Remove concrete trip hazards.	1450.0	400 sf.	2,000					
	B. Miscellaneous concrete work.	1450.0	250 sf.	1,500					
CHALET TERRACE	C. Corrective action at concrete steps		AN.	1,000					
MI 38-001	D. Replace fence at north property lin		1200 lf.	30,000					
	E. Paint fence barbed wire supports.	1450.0	1 ea.	1,000					
	F. Replace fence barbed wire.	1450.0	10 lf.	1,750					
	G. Reapply parking lot seal coat.	1450.0	24000 sf.	4,800					
	H. Clean; reseal maintenance brick w	all. 1470.0	4400 sf.	4,400					
	L Tuck point maintenance brick wall.	1470.0	200 sf.	2,000					
	J. Instalil bollards at Ayieko Center	1470.0	15 ea.	4,500			İ		
	K. Install development wide exterior	1470.0	1,500 sf	600					
	surveillance system.	1470.0	15 ea.	4,500					
	Subtotal MI 38-001			127,950					
Scattered Sites	3000001111120-001			127,556		_		<u> </u>	
MI 38-007								<del> </del>	
26 3BR Units									
<u> </u>	Total AMP 1			127,950		<u> </u>			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages										
PHA Name:	Jackson Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P03850111 CFFP (Yes/ No): Replacement Flousing Factor Grant No:				Federal FFY of Grant: 2011			
Development Number General Description of Maj Name/PHA-Wide Categories Activities		Work	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 2										
Reed Manor										
MI 38-002										
								<u> </u>	ļ	
				_						
						<u> </u>			<u> </u>	
	Subtotal MI 38-002			_						
	Subtotat IVII 36-002									
Reed Manor	A. Elevator replacement B, C, G	Bldgs	1460.0	3 ca.	193,620			·	·   · · · · · · · · · · · · · · · · · ·	
MI 38-003	A. Elevator replacement D, C, C	Diuga.	1400.0		153,020					
1711 30 003										
	Subtotal MI 38-003			·	193,620					
								,		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages										
PHA Name:  Jackson Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P03850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal l	Federal FFY of Graat: 2011			
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima		Total Actual (	Cost	Status of Work	
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
Reed Manor	A. Replace elevators H, I Bldgs.		1460.0	2 ea.	140,230					
M1 38-004										
					·					
					1					
					<u> </u>					
	Subtotal MI 38-004				140,230					
	Total AMP 2				333,850					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Ty Capital Fu CFFP (Ye	pe and Number Ind Program Grant No 15/ Not	: MI33P038501	11	Federal 1	FFY of Grant: 20	11	
Jackson Housing	g Commission	Replacem	ent Housing Factor Gr	ant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	nted Cost	d Cost Total Actual Cost		Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 3									<u></u>
Shahan-Blackstone									
MI 38-005									ļ. <u></u>
									<u> </u>
				<del> </del>					
				<del> </del>	<u> </u>				<u> </u>
				<del> </del>	<del> </del>				
						<del></del>			
									-
	Subtotal MI 38-005				0				
				<u> </u>					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages	i				· · · · · · · · · · · · · · · · · · ·				
PHA Name:		Capital Fo	pe and Number and Program Grant No	o: MI33P038501	11	Federal	FFY of Grant: 20	111	
Jackson Housing Commi	ssion	CFFP (Yes/ No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ited Cost	Total Actual Cost		Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
Shahan-Blackstone	A. Install bedroom ceiling fixture	5.	1460.0	140 ea.	35,000				
MI 38-006	B. Install drywall/laundry boxes.		1460.0	60 ea.	29,860				
	Subtotal MI 38-006	-			64,860				
Scattered Sites									
MI 38-007									
14 3BR Units									
	Subtotal MI 38-007 SB				0				
	Total AMP 3				64,860		ļ		
				-				<u> </u>	
							ļ		
				_					
					-			-	
				1	ļ		-		<u> </u>
			1				i		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name:						Federal	FFY of Grant: 2	011	
Jackson Housing Commi	ssion	Capital Fund Program Grant No: MI33P03850111 CFFP (Yes/ No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide									-
Operations	Provide funding routine PHA operations		1406.0		143,730		<u> </u>		
Management	Replace; add; upgrade computer systems.		15 ea.		8,822				
Improvements			1410.0						
Administration									
A&E Fees	AMP 1-Chalet Terrace		1430.1		10,240				
& Costs	AMP 2-Reed Manor		1430.2		23,370				
	AMP 3-Shahan-Blackstone		1430.3		<u>5.840</u>				
	Total A& E Fees & Cos	ts			39,40				
Contingency	-		1502.0						

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement, <sup>2</sup> To be completed for the Performance and Evaluation Report.

A Name: Jackson Housing	3 Commission				Federal FFY of Grant: 2011
Development Number Name/PHA-Wide Activities	All Fund (Quarter I	l Obligated Ending Date)	All Fund (Quarter I	s Expended Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	07/15/2013		07/15/15		
AMP 1	07/15/2013		07/15/15		
AMP 2	07/15/2013	-	07/15/15		
AMP 3	07/15/2013		07/15/15		
					·

<sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Par	t I: Summary	•				
PHA	Name/Number		Locality (City/C		🛮 🖾 Original 5-Year Plan 🔻 🗀 I	Revision No:
Jack	son Housing Commission N	/II038	Jackson, Jackson	County, Michigan		
A.	Development Number and Name	Work Statement for Year 1 FFY <u>2011</u>	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY 2015
	AMP 1 Chalet Terrace MI33P03800001		195,210	346,080	523,810	105,750
	AMP 2 Reed Manor MI33P03800002		329,210	134,680	19,230	154,150
	AMP 3 Shahan-Blackstone MI33P03800003		33,100	86,900	18,350	307,420
B.	Physical Improvements Subtotal	Annual Statement	557,520	567,660	561,390	567,320
C.	Management Improvements		17,412	7,232	13,542	7,572
D.	PHA-Wide Non-dwelling Structures and Equipment					
Ē.	Administration					
F.	Other					
G.	Operations	1985	143,730	143,730	143,730	143,730
Н.	Demolition					
<u>I.</u>	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds	Approved 2010:	718,662	718,662	718,662	718,662
L.	Total Non-CFP Funds		0.145			
M.	Grand Total		718,662	718,662	718,662	718,662

PHA	Name/Number		Locality (City/e	county & State)	⊠Original 5-Year Plan		
A.	Development Number and Name	Work Statement for Year 1 FFY 2011	Work Statement for Year 2 FFY 2012	Work Statement for Year 3 FFY <u>2013</u>	Work Statement for Year 4 FFY 2014	Work Statement for Year 5 FFY <u>2015</u>	
		Annual - Statement					
			**************************************				
		To the second se					
					-		

Part II: Sup	porting Pages – Physic	cal Needs Work Staten	nent(s)			
Work	W	ork Statement for Year 2012	2	W	ork Statement for Year: 201	<u>3</u>
Statement for		FFY <u>2012</u>			FFY <u>2013</u>	
Year 1 FFY	Development	General Description of	Estimated Cost	Development	General Description of	Estimated Cost
<u>2011</u>	Number/Name	Major Work Categories		Number/Name	Major Work Categories	
See	AMP 1 Chalet Terrace	A. Reapply driveway		AMP 1 Chalet Terrace	A. Clean smoke	
4.5	MI 38-001	seal coat; patch 5%;	4,800	MI 38-001	detectors.	5,000
		repair 10% curb.  B. Mature tree trim;			B. Replace 10 ea.	
- Annual -		1	8,500		furnaces.	15,000
		shape C. Clean smoke	0,000		C. Relocate ½ electrical	12,000
Statement.		detectors.	5,000		service underground	325,000
		D. Correct grades to	2,000		301 Vice underground	323,000
		improve drainage.				
		improve dramage.	8,500			
Sale State of the Sale		E. Replace downspouts				
		all buildings.	17,600			
		F. Replace gutters all buildings	34,230			
		G. Redirect water				
		discharge family bldgs.	12,000			
						7.47.000
Alle Cartina		Subtotal MI 38-001	90,630		Subtotal MI 38-001	345,000
	Scattered Sites	A. Clean smoke		Scattered Sites	A. Clean smoke	
	(MI 38-007)	detectors.	1,080	(MI 38-007)	detectors.	1,080
	26 3BR Units	B. Replace VCT all		26 3BR Units		
		units.	56,250			
		C. Replace vinyl wall				
a Carrier (1988)		base all units	20,250			
77.75	-	D. Replace vinyl sheet		İ		
		flooring in baths	7,500			
		E. Mature tree				
		trimming; shaping	5,000			
		F. Add handrails at 4				
		ea. entry ramps.	2,000			

			-
Expires	4/30	/20(	111

	G. Landscape				
	improvements.	1,500			
	H. Replace entry light				
	fixtures.	13,000			
	Subtotal MI 38-007			Subtotal MI 38-007	
	СТ	104,580		CT	1,080
AMP 1	Subtotal of Estimated Cost	\$ 195,210	AMP 1	Subtotal of Estimated Cost	\$ 346,080
	1				

Part II: Supp	orting Pages – Phy	sical Needs Work Statem	ient(s)		1 100 100 100 100 100 100 100 100 100 1		
Work		Work Statement for Year 2012	•	Work Statement for Year: 2013			
Statement for		FFY <u>2012</u>		FFY <u>2013</u>			
Year 1 FFY	Development	General Description of	Estimated Cost	Development	General Description of	Estimated Cost	
2011	Number/Name	Major Work Categories		Number/Name	Major Work Categories		
See :	AMP 2	A. Clean smoke		AMP 2	A. Clean smoke		
	Reed Manor	detectors.	580	Reed Manor	detectors.	580	
Annual	MI 38-002	B. Replace limestone		MI 38-002	1		
		chimney top.	500				
Statement		C. Repair roof/flashing					
		separation.	2,000				
		Subtotal A Building	3,080		Subtotal A Building	580	
	Reed Manor	A. Clean smoke		Reed Manor	A. Reapply driveway		
and the second	MI 38-003	detectors	3,650	MI 38-003	seal coat; patch 5%;		
		B. Convert 8 units meet			curb 10%.	12,000	
		504 standards.	160,000		B. Tuck-point; clean;		
		C. Install 2 ea.			reseal brick.	15,000	
		automatic door openers			C. Clean smoke		
		to meet 504 standards.	6,000		detectors.	3,650	
		i			D. Replace storage room		
					entry doors.	10,800	
		1			Replace flashing and		
					roofing at flues.	15,000	

		Subtotal B-G			Subtotal B-G	
		Buildings	169,650		Buildings	56,450
	Reed Manor	A. Clean smoke		Reed Manor	A. Reapply driveway	
	MI 38-004	detectors.	3,150	MI 38-004	seal coat; patch 5%;	
					curb 10%.	52,500
		B. Convert 7 units to			B. Tuck-point; clean;	
		meet 504 standards.	140,000		reseal brick.	22,000
		C. Replace soffit.	13,330		C. Clean smoke	
			1		detectors.	3,150
and the state of		Subtotal H-I Buildings	156,480		Subtotal H-I Buildings	77,650
				1.1.1.1111		
Salas Barrieras						
	AMP 2	Subtotal of Estimated Cost	\$ 329,210	AMP 2	Subtotal of Estimated Cost	\$ 134,680

Part II: Supp	orting Pages – Physi	ical Needs Work Staten	ient(s)				
Work		Vork Statement for Year 2012		Work Statement for Year: 2013			
Statement for		FFY <u>2012</u>			FFY <u>2013</u>		
Year 1 FFY	Development	General Description of	Estimated Cost	Development	General Description of	Estimated Cost	
2011	Number/Name	Major Work Categories		Number/Name	Major Work Categories		
See	AMP 3	A. Secure soffit to eave.	11,500	AMP 3	A. Reapply driveway		
	Shahan-Blackstone		-	Shahan-Blackstone	seal coat; patch 5%;		
	MI 38-005			MI 38-005	repair curb 10%	6,200	
Annual		B. Clean smoke			B. Clean smoke		
		detectors.	1,200		detectors.	1,200	
Statement					C. Replace VCT		
4,50					Community Building		
					baths.	300	
					D. Replace vinyl wall		
					base Community		
					Building baths.	100	

					E. Replace VCT Head	
					Start area.	2,300
200		1			F. Replace vinyl wall	200
					base Head Start area.	300
		is .			G. Replace VCT office; kitchen; etc.	4,400
					H. Correct grade at 5	1,100
					buildings.	12,500
3 S S S S S S S S S S S S S S S S S S S					Durium 53.	,
		Subtotal MI 38-005	12,700		Subtotal MI 38-005	27,300
100 Line 150 Line 150	Shahan-Blackstone	A. Clean smoke		Shahan-Blackstone	A. Reapply	
	MI 38-006	detectors.	1,500	MI 38-006	driveway seal coat;	
					patch 5%; repair	
					curb 10%	11.000
						11,200
					B. Clean smoke	1 500
					detectors.	1,500
				10=10=100 T		
				•		
		Subtotal MI 38-006	1,500		Subtotal MI 38-006	12,700
	Scattered Sites	A. Replace gable end	1,500	Scattered Sites	A. Clean smoke	22,700
	(MI33P038007)	panel siding.	6,300	(MI33P038007)	detectors.	650
	14 3BR Units	B. Install smoke		14 3BR Units	B. Replace VCT all	
	17 SDR SING	detectors all bedrooms.	8,400		units.	30,500
000000000000000000000000000000000000000		C. Install CO detectors.			C. Replace vinyl wall	
		:	4.200		base all units.	11,250
					D. Replace vinyl sheet	
					flooring in baths.	4,500
						16.00
Market State		Subtotal MI 38-7 SBN	18,800		Subtotal MI 38-7 SBN	46,00
and the second second	AMP 3 Sub	ototal of Estimated Cost	\$ 33,100	AMP 3 Su	btotal of Estimated Cost	\$ 86,900
	Ante 3 Sur	notal of Estimated Cost	D 55,100	ZALTAA UU	or summer out	ψ 00,200

Part II: Supporting Pages – Physical Needs Work Statement(s) Work Statement for Year 2014 Work Statement for Year: 2015 Work FFY 2015 FFY 2014 Statement for General Description of General Description of Development Estimated Cost Estimated Cost Year 1 FFY Development Major Work Categories Major Work Categories Number/Name 2011 Number/Name A. Sand; prime; paint A. Reapply driveway AMP 1 Chalet Terrace See. **AMP 1 Chalet Terrace** exterior doors. 15,150 seal coat; patch 5%; ML38-001 MI 38-001 repair curb 10% 4.800 B. Sand: prime: paint B. Mature tree trim; Annual 200 flag pole. 8.500 shaping.. C. Re-roof family C. Clean smoke Statement 000,88 buildings. detectors. 5,000 D. Re-roof senior D. Replace interior 90,000 laundry building.. 2,400 doors: frames... E. Replace kitchen 49,000 cabinets; countertops. F. Relocate 1/2 electrical underground. 325,000 G. Replace 100 ea. furnace supply 35,000 dampers. 105,750 Subtotal MI 38-001 517,300 Subtotal MI 38-001 A. Clean smoke A. Clean smoke Scattered Sites **Scattered Sites** 1,080 (MI 38-007) detectors. 1.080 (MI 38-007) detectors. 26 3BR Units 26 3BR Units B. Mature tree 5.430 trimming; shaping. Subtotal MI 38-007 Subtotal MI 38-007 CT  $\mathbf{CT}$ 6,510

AMP 1 Subto	otal of Estimated Cost	\$ 523,810	AMP 1	Subtotal of Estimated Cost	\$ 158,380
	1				

Part II: Supp	orting Pages – Phy	sical Needs Work Statem	ent(s)					
Work		Work Statement for Year 2014			Work Statement for Year: 2015			
Statement for		FFY <u>2014</u>		FFY <u>2015</u>				
Year 1 FFY	Development	General Description of	Estimated Cost	Development	General Description of	Estimated Cost		
2011	Number/Name	Major Work Categories		Number/Name	Major Work Categories			
See 3	AMP 2	A. Clean smoke		AMP 2	A. Clean smoke			
	Reed Manor MI 38-002	detectors.	580	Reed Manor MI 38-002	detectors.	580		
. Annual A				• • • • • • • • • • • • • • • • • • • •	B. Repaint balcony			
100					ceiling.	3,160		
Statement					C. Repaint balcony			
4.5					railings.	1,260		
		Subtotal A Building	580		Subtotal A Building	4,000		
	Reed Manor	A. Clean smoke		Reed Manor	A. Reapply driveway;			
	MI 38-003	detectors.	3,650	MI 38-003	seal coat; patch 5%; repair 10% curb.	12,000		
26.3.5		B. Replace laundry			B. Tuck point; reseal			
and the sales		room sinks.	4,500		brick.	15,000		
110		C. Replace laundry			C. Clean smoke			
0.0		room countertops.	4,500		detectors.	3,650		
100 100 100 100 100					D. Repair rotting			
Constitution					colonnade railing;			
					repaint flooring;			
					railings, and columns	11,950		

		Subtotal B-G			Subtotal B-G	
1 05 Table 10 10 10 10 10 10 10 10 10 10 10 10 10		Buildings	12,650		Buildings	42,600
and the second						
	Reed Manor	A. Replace laundry		Reed Manor	A. Reapply driveway;	
	MI 38-004	room sinks.	3,000	MT 38-004	seal coat; patch 5%;	
7 (14.4)					repair 10% curb.	52,500
		B. Replace laundry			B. Tuck point; reseal	
		room countertops.	3,000		brick.	22,000
					C. Clean smoke	
					detectors.	3,150
					D. Main office	
					renovation.	25,000
					E. Replace garage doors	
					and openers.	4,000
			-		F. Replace entry door	
					frame; hardware.	900
		Subtotal H-I Buildings	6,000		Subtotal H-I Buildings	107,550
	AMP 2 S	ubtotal of Estimated Cost	\$ 19,230	AMP 2	Subtotal of Estimated Cost	\$ 154,150

Part II: Supp	oorting Pages – Physi	cal Needs Work Statem	ient(s)				
Work	V	Vork Statement for Year 2014		Work Statement for Year: 2015			
Statement for		FFY <u>2014</u>			FFY <u>2015</u>		
Year 1 FFY	Development	General Description of	Estimated Cost	Development	General Description of	Estimated Cost	
2011	Number/Name	Major Work Categories		Number/Name	Major Work Categories		
See	AMP 3	A. Clean smoke		AMP 3	A. Reapply driveway;		
-366	Shahan-Blackstone	detectors.	1,200	Shahan-Blackstone	seal coat; patch 5%;		
	MI 38-005	detectors.	1,200	MI 38-005	repair 10% curb.	6,200	
: Annual		B. Replace playground			B. Clean smoke		
		equipment; add mulch.	10,000		detectors.	1,200	
Statement					C. Replace stair		
					treads/risers all units.	27,000	
					D. Replace bi-fold		
					closet doors.	76,000	
		Subtotal MI 38-005	11,200		Subtotal MI 38-005	110,400	

	Shahan-Blackstone	A. Clean smoke		Shahan-Blackstone	A. Reapply driveway;	
	MI 38-006	detectors	1,500	MI 38-006	seal coat; patch 5%;	
					repair 10% curb.	11,200
		B. Replace playground			B. Clean smoke	
		equipment; add mulch.	5,000	,	detectors.	1,500
					C. Replace bi-fold closet	
					doors.	90,000
		Subtotal MI 38-006	6,500		Subtotal MI 38-006	102,700
100000000000000000000000000000000000000						
	Scattered Sites	A. Clean smoke		Scattered Sites	A. Clean smoke	
	(MI33P038007)	detectors	650	(MI33P038007)	detectors	650
	14 3BR Units			14 3BR Units	B. Replace kitchen	
100		· 1			cabinets; countertops.	91,000
					C. Mature tree	
					trimming; shaping	2,670
		Subtotal MI 38-7 SBN	650		Subtotal MI 38-7 SBN	94,320
	AMP 3 Su	btotal of Estimated Cost	\$ 18,350	AMP 3 S	ubtotal of Estimated Cost	\$ 307,420
	AIII 5 50	ototal of Estimated Cost	\$ 10,550			<b>-</b> - · · · , ·

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

	Summary				Zitpiles Wood2011
PHA Nat Jackso	me: n Housing Commission Grant Type and Number Capital Fund Program Grant No: M Replacement Housing Factor Grant Date of CFFP:	I33P03850107 No:		· ·	FY of Grant: 2007 FY of Grant Approval: 2008
⊠ Perfo	nal Annual Statement Reserve for Disasters/Emergenciormance and Evaluation Report for Period Ending: At 09/30/2010		] Revised Annual Statement (revisi ] Final Performance and Evaluatio	on no: 2) on Report	
Line	Summary by Development Account		imated Cost		ctual Cost 1
1	Total non-CFP Funds	Original	Revised <sup>2</sup>	Obligated	Expended
2	1406 Operations (may not exceed 20% of line 21) <sup>3</sup>	138,212	138,012	138,012	138,012
3	1408 Management Improvements	5,582	5,465	5,465	
4	1410 Administration (may not exceed 10% of line 21)		-,,,,,	3,703	3,103
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	38,500	88,627	88,738	85,396
8	1440 Site Acquisition		003027	00,750	00,000
9	1450 Site Improvement	47,030	30,624	30,624	24,764
10	1460 Dwelling Structures	375,016	361,792	361,792	
11	1465.1 Dwelling Equipment—Nonexpendable				301,,,2
12	1470 Non-dwelling Structures	86,720	66,540	66,540	66,540
13	1475 Non-dwelling Equipment		-3		33,010
14	1485 Demolition				
15	1492 Moving to Work Demonstration		1 1111111111111111111111111111111111111		
16	1495.1 Relocation Costs				
17	1499 Development Activities <sup>4</sup>				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part I: S	Summary				27,711 00 1700/2011
PHA Nam	Grant Type and Number	3 - THE STATE OF T	FFY of Gran	it: 2007 it Approval: 2007	
Jackson H Commission			Tar or Gran	respiravati 2007	
	erant nal Annual Statement Reserve for Disasters/Emergen mance and Evaluation Report for Period Ending: At 09/30,2010	ncies	Revised Annual	Statement (revision no: 2) see and Evaluation Report	
Line	Summary by Development Account	Total Estima		Total Actual	Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
I 8a	1501 Collateralization or Debt Service paid by the PHA				
I 8ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant: (sum of lines 2 - 19)	691,060	691,060	691,060	687,829
21	Amount of line 20 Related to LBP Activities				007,022
22	Amount of line 20 Related to Section 504 Activities			-	
23	Amount of line 20 Related to Security - Soft Costs				
24	Amount of line 20 Related to Security - Hard Costs				
25	Amount of line 30 Related to Energy Conservation Measures				
Signatu	re of Executive Director: Phillip M. Fracker, PHM D	ate: 10/01/2010   Signature	of Public Housing Direc	tor	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Page PHA Name:		nt Type and Number			Endonall	PPM of Classic 20	107		
Jackson Housing Commission CFFP (		tal Fund Program Grant N P (Yes/ No):	al Fund Program Grant No: MI33P03850107			Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.			ated Cost	Total Actual (	Status of Work		
				Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 1	A. Trim and shape mature trees.	1450.0	30 ea.					Moved to FY08	
	B. Landscape improvements.	1450.0	4,700 sf					Moved to FY08	
CHALET TERRACE	C. Remove unused flower boxes and d	irt. 1450.0	4 ea.	0				Completed.	
MI 38-001	D. Sand; patch; prime; paint; ext. doors	. 1460.0						Replace doors.	
	E. Replace resilient tread risers.	1460.0	68 units.	23,800	23,800	23,800	23,800	Completed	
	F. Replace exterior doors; hardware; et		136 Fam.	116,916	119,300	119,300	119,300	Completed.	
	G. Replace exterior doors; hardware; e	tc. 1460.0	64 Elderly	57,000	57,000	57,000	57,000	Completed.	
	H. Paint furnace flues heat resistant pai		100 ea.	5,000	5,000	5,000	0		
	I. Replace exterior door maintenance b		1 ea.					Completed 06	
	J. Replace office storefront door (HCU	) 1470.0	1 ea.					Completed 06	
	K. Replace office/community /head sta			9,130	9,130	<u>9.130</u>	9,130	Completed.	
	Community building gutters/downspou	ts.							
	Subtotal MI 38-001			211,846	214,230	214,230	214,230	Completed.	
Scattered Sites				211,070	#179UU	417,530	1 214,230	Completed.	
MI 38-007									
26 3BR Units				1					
	Subtotal MI 38-007-CT								
	Subtotal AMP 1			211,846	214,230	214,230	214,230	Completed.	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
<sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page:	S								
PHA Name:  Jackson Housing Comm	Capital CFFP (	Grant Type and Number Capital Fund Program Grant No: MI33P03850107 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal 1	Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Quantity Total Account No.		Total Estimated Cost		Total Actual 0	Cost	Status of Work	
				Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 2	A. Mature tree trim; plantings	1450.0						Moved to FY08	
Reed Manor	B. Replace exterior doors; hardware; etc.	1460.0	23 ea.	20,500	20,500	20,500	20,500	Completed.	
MI 38-002	C. Install ducted range hoods/vent fans.	1460.0	23 ea.	0	18,000	18,000	18,000	Completed.	
	D. Paint solar screen.	1470.0	4,400 sf.	30,800	0	0		Remove RAB	
	E. Replace stairwell doors.	1470.0	10 ea.	11,290	11,290	11,290	11,290	Completed.	
	F. Repair south end stairwell walls.	1470.0	575 sy	<u>0</u>	10,520	<u>10.520</u>	10,520	Completed.	
	Subtotal MI 38-002			62.590	60,310	60,310	60,310		
Reed Manor	A. Mature tree trim; plantings.	1450.0		11,280	1,324	1,324	1,324	Completed	
MI 38-003	B. Paint furnace flues heat resistant paint.		150 ea.	7,500	7,500	7,500	7,500	Completed.	
	C. Remove; replace carpeting D, E, F, G	1460,0	1,500 sy	1 .,,,,,,,	45,250	45,250	45,250	Completed.	
	building corridors; social rooms.				1 1 1 1 1	15,250	13,230	Compictua.	
	D. Replace cove base D, E, F, G, building	1460.0	5,200 lf		15,400	15,400	15,400	Completed.	
	Corridors; social rooms.								
	Subtotal MI 38-003			20,250	74,450	74,450	74,450	Completed.	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page	<b>S</b>									
PHA Name:  Jackson Housing Commi	Jackson Housing Commission  Capita CFFP Repla			Grant Type and Number Capital Fund Program Grant No: MI33P03850107 CFFP (Yes/ No): Replacement Housing Factor Grant No:			Federal FFY of Grant: 2007			
Development Number Name/PHA-Wide Activities	ame/PHA-Wide Categories		Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
Reed Manor	A. Mature tree trim; plantings.		1450.0		11,280	1,324	1,324	1,324	Completed.	
MI 38-004	B. Paint all unit walls; ceilings; co	orridors;	1460.0		136,500	42,242	42,242	42,242	Completed.	
	Laundry & social rooms.  C. Paint furnace flues heat resistant paint.								•	
			1460.0	48 ea.	2,400	2,400	2,400	2,400	Completed	
	D. Replace carpeting corridors, so	cial	1460.0	11,400 sf	26,000	26,000	26,000	26,000	Completed.	
	Rooms, lobbies.									
	E. Replace vinyl wall base corrido	ors,	1460.0	42,000 lf	<u>9,500</u>	<u>9,600</u>	<u>9,600</u>	<u>9,600</u>	Completed.	
	Lobbies, community spaces.									
	Subtotal MI 38-004				185,680	81,566	81,566	9,600	Completed.	
		,				22,200	21,000	2,000	Completed.	
	Subtotal AMP 2				268,520	216,326	216,326	216,326	Completed.	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page PHA Name:	Grat	nt Type and Number			Federal l	FFY of Grant: 20	07		
	CFFI	Capital Fund Program Grant No: MI33P03850107 CFFP (Yes/ No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 3	A. Mature tree trim; plantings.	1450.0	10 ea.	8,500	8,500	8,500	8,500	Completed.	
Shahan-Blackstone	B. Landscape improvements.	1450.0		6,000	6,000	6,000	6,000	Completed.	
MI 38-005	C. Paint furnace flues heat resistant pai	nt. 1460.0	48 ea.	2,400	2,400	2,400	2,400	Completed.	
	Subtotal MI 38-005			16,900	16,900	16,900	16,900	Completed.	
				.					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

PHA Name:		rant Type and Number apital Fund Program Grant No: MI33P03850107			Federal l	Federal FFY of Grant: 2007			
Jackson Housing Comm	ission CFF	CFFP (Yes/No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Worl Categories	Development Account No.			ated Cost	Total Actual Cost		Status of Work	
				Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
Shahan-Blackstone	A. Mature tree trim; plantings.	1450.0	10 ea	8,500	8,500	8,500	8,500	Completed.	
MI 38-006	B. Replace tree pits	1460.0	8 ea.						
	C. Paint furnace flues heat resistant paint.		60 ea.	3,000	3,000	3,000	3,000	Completed.	
	Subtotal MI 38-006			11,500	11,500	11,500	11,500	Completed.	
Scattered Sites									
MI 38-007									
14 3BR Units									
	Subtotal MI 38-007 SB								
	Subtotal AMP 3			28,400	28,400	28,400	28,400	Completed.	

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Page PHA Name:	S								
Jackson Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P03850107 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal I	FFY of Grant: 20	07	
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estim	ated Cost	Total Actual Cost		Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide									
Operations	Provide funding routine PHA open	rations	1406.0		138,212	138,012	138,012	138,012	Completed.
Management			1408.0		5,582	5,465	5,465	5,465	Completed
Improvements			1410.0						
Administration			1410.0						
A&E Fees	AMP 1-Chalet Terrace		1430.1		15,840	17,840	15,840	15,840	Part ARRA/08
& Costs	AMP 2-Reed Manor		1430.2		20,870	15,470	15,470	15,470	
	AMP 3-Shahan-Blackstone		1430.3		1.790	<u>55,317</u>	55,317	52086	Part ARRA/08
	Subtotal A&E Fees & Cos	ts			38,500	88,627	88,627	85396	
Contingency			1502.0						

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

A Name: Jackson Housing	g Commission				Federal FFY of Grant: 2007
Development Number Name/PHA-Wide Activities	(Quarter I	d Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	09/13/2010	08/03/2010	09/13/2011		
AMP 1	09/13/2010	05/31/2008	09/13/2011	09/30/2010	
AMP 2	09/13/2010	08/03/2010	09/13/2011	09/30/2010	
AMP 3	09/13/2010	05/31/2008	09/13/2011	09/30/2010	

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: S	ummary								
PHA Name	e: ousing Commission		FY of Grant: 2009 FY of Grant Approval: 2009						
Type of Grant  Original Annual Statement  Reserve for Disasters/Emergencies  Revised Annual Statement (revision no:1)  Performance and Evaluation Report for Period Ending: 09/30/2010  Final Performance and Evaluation Report									
Line	Summary by Development A	ccount	Total Est	imated Cost	Total A	ctual Cost 1			
			Original	Revised <sup>2</sup>	Obligated	Expended			
1	Total non-CFP Funds								
2	1406 Operations (may not exc	ced 20% of line 21) <sup>3</sup>							
3	1408 Management Improvement								
4	1410 Administration (may not	exceed 10% of line 21)							
5	1411 Audit								
6	1415 Liquidated Damages								
7	1430 Fees and Costs		38,404	38,404	38,404	36,366.65			
8	1440 Site Acquisition								
9	1450 Site Improvement								
10	1460 Dwelling Structures		851,490	851,490	851,490	)			
11	1465.1 Dwelling Equipment—	*							
12	1470 Non-dwelling Structures								
13	1475 Non-dwelling Equipmen	ıt							
14	1485 Demolition								
15	1492 Moving to Work Demor	stration							
16	1495.1 Relocation Costs								
17	1499 Development Activities	4							

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

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<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

Part I: S	Summary							
PHA Nam Jackson H Commissio	Grant Type and Number Capital Fund Program Grant No: M133S03850109 Residenment Housing Egyter Grant No:		FFY of Gr FFY of Gr	ant: 2009 ant Approval: 2009				
Type of Grigin  Perfor	rant nal Annual Statement Reserve for Disasters/Emergencies primance and Evaluation Report for Period Ending: 09/30/2010		Revised Annual Statement (revision no:1) Final Performance and Evaluation Report					
Line	Summary by Development Account		nated Cost	Total Actu				
		Original	Revised <sup>2</sup>	Obligated	Expended			
18a	1501 Collateralization or Debt Service paid by the PHA							
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment							
19	1502 Contingency (may not exceed 8% of line 20)							
20	Amount of Annual Grant:: (sum of lines 2 - 19)	889,894	889,894	889,894	36,366.65			
21	Amount of line 20 Related to LBP Activities							
22	Amount of line 20 Related to Section 504 Activities							
23	Amount of line 20 Related to Security - Soft Costs							
24	Amount of line 20 Related to Security - Hard Costs							
25	Amount of line 20 Belated to Energy Conservation Measures							
Signatu	re of Executive Director Phillip M. Fracker, PHM Daniel Community	ate 10/01/2010   Signatu	re of Public Housing Dir	rector	Date			

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages PHA Name:		Grant T Capital F	ype and Number und Program Grant N	o: MI33S03850	109	Federal I	FFY of Grant: 20	09	
Jackson Housing Comn	nission	CFFP (Yes/No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories		Development Account No.	Quantity	Total Estimated Cost		Cost Total Actual Cost		Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 1									
Chalet Terrace									
MI033P038001									
	Subtotal MI33P038001								
Scattered Sites	A. Tear off; reroof.		1460.0	260 sq	68,300	68,300	68,300		
(MI33P038007)	B. Replace soffits		1460.0	1000 sq	32,500	32,500	32,500		
26 3BR Units	C. Replace furnaces		1460.0	26 ea.	65,000	65,000	65,000		
	D. Replace hot water heaters.		1460.0	26 ea.					
	E. Replace windows.		1460.0	182 ea.	91,000	63,230	63,230		Contract/CO1
	F. Replace exterior doors; frames	,	1460.0	52 ea.	70,000	70,000	70,000		
	hardware: screen doors.								
	Subtotal MI33P038007(C	Subtotal MI33P038007(CT)			326,800	326,800	326,800		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:  Jackson Housing Comm	Jackson Housing Commission CFI			rant Type and Number pital Fund Program Grant No: M133S03850109 FP (Yes/ No): placement Housing Factor Grant No:				09	
Development Number Name/PHA-Wide Activities	ber General Description of Majo Categories		Development Account No.	Quantity	Total Estim	ated Cost	Total Actual C	Cost	Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 3	A. Replace windows.		1460.0	250 ea.	0	87,300	87,300		Contract/CO1
Shahan-Blackstone									From 2008
MI33P038005									
Shahan-Blackstone	A. Replace exterior doors; frames	;	1460.0	120 ea.	155.500	155,500			
Shahan-Blackstone	hardware; screen doors.								
MI 38-006	B. Replace windows.		1460.0	300 ea	145,500	101,400	101,400		Contract/CO1
Scattered Sites	A. Tear off; reroof.		1460.0	135 sq	38,000	38,000	38,000		
(MI33P038007)	B. Replace gutters; downspouts.		1460.0	2000 If	15,000	15,000	15,000	<u> </u>	
14 3BR Units	C. Replace soffit.		1460.0	54 sq	18,000	18,000	18,000	Ì	
	D. Replace fascia.		1460.0	4500 lf	19,000	19,000	19,000		
	E. Replace windows.		1460.0	98 ea	49,890	34,380	34,380		Contract/CO1
	F. REplace exterior doors; frames	5;	1460.0	28 ea.	37,000	37,000	37,000		
	G. Replace furnaces.		1460.0	14 ea.	35,000	35,000	35,000		
	H. Replace hot water heaters.		1460.0	14 ea.	11,800	11,800	11,800		
AMP 1-Chalet Terrace	A&E Fees-Develop PNA		1430.0	1 ea.	11,010	11,010	11,010	11,010	Completed.
AMP 2-Reed Manor	A&E Fees-Develop PNA		1430.0	l ea	18,194	18,194	18,194	18,194	Completed
AMP 3-Shahan-Blacks	A&E Fees-Develop PNA		1430.0	l ea	9,200	9,200	9,200	7164	Completed

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part III: Implementation Scho	edule for Capital Fund	Financing Program			
PHA Name: Jackson Housin			710.07.38		Federal FFY of Grant: ARRA 2009
Development Number Name/PHA-Wide Activities		l Obligated Ending Date)		s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date	
PHA Wide	03/17/2010	02/18/2010	03/17/2013		
MI 38-001 AMP 1	03/17/2010	02/18/2010	03/17/2013		
MI 38-002 AMP 2	03/17/2010	02/18/2010	03/17/2013		
MI 38-003 AMP 3	03/17/2010	02/18/2010	03/17/2013		

<sup>&</sup>lt;sup>1</sup>Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Part I: S	ummary							
PHA Nam		3850109			FY of Grant: 2009 FY of Grant Approval: 2009			
Type of Grant  ☐ Original Annual Statement ☐ Reserve for Disasters/Emergencies ☐ Revised Annual Statement (revision no: )  ☑ Performance and Evaluation Report for Period Ending: 09/30/2010 ☐ Final Performance and Evaluation Report								
Line	Summary by Development Account		imated Cost		Actual Cost			
		Original	Revised <sup>2</sup>	Obligated	Expended			
1	Total non-CFP Funds	1						
2	1406 Operations (may not exceed 20% of line 21) 3	87,394	87,394	87,394	87,394			
3	1408 Management Improvements	15,266						
4	1410 Administration (may not exceed 10% of line 21)							
5	1411 Audit							
6	1415 Liquidated Damages							
7	1430 Fees and Costs	43,940		,				
8	1440 Site Acquisition							
9	1450 Site Improvement	12,900		:				
10	1460 Dwelling Structures	332,260						
11	1465.1 Dwelling Equipment—Nonexpendable	37,000						
12	1470 Non-dwelling Structures	167,360						
13	1475 Non-dwelling Equipment	-						
14	1485 Demolition							
15	1492 Moving to Work Demonstration							
16	1495.1 Relocation Costs							
17	1499 Development Activities <sup>4</sup>		***************************************					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>4</sup> RHF funds shall be included here.

Part I: S	иттагу					
PHA Name Jackson H Commissio	ousing	Grant Type and Number Capital Fund Program Grant No: MI33P03850109 Replacement Housing Factor Grant No: Date of CFFP:			FFY of Grant: 2009 FFY of Grant Approval: 2009	
	al Annual : mance and	Statement Reserve for Disasters/Emergencies Evaluation Report for Period Ending: 09/30/2009			nd Evaluation Report	
Line	Summar	y by Development Account	Total Estin			Actual Cost 1
			Original	Revised 2	Obligated	Expended
18a	1501 Col	lateralization or Debt Service paid by the PHA				
18ba	9000 Col	llateralization or Debt Service paid Via System of Direct Payment				
19	1502 Co	ntingency (may not exceed 8% of line 20)				
20	Amount	of Annual Grant:: (sum of lines 2 - 19)	696,121		87,394	87,394
21	Amount	of line 20 Related to LBP Activities				
22	Amount	of line 20 Related to Section 504 Activities				
23	Amount	of line 20 Related to Security - Soft Costs				
24		of line 20 Related to Security - Hard Costs				
25	Amount	of line 20 Related to Energy Conservation Measures				
Signatui		ecutive Director: Phillip M. Fracker, PHM Dat	e 10/01/2010   Signatu	re of Public Ho	using Director	Date

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.

<sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

Part II: Supporting Pages PHA Name:		Type and Number			Federal	FFY of Grant: 2	609	
Jackson Housing Commi	Capital CFFP (	Capital Fund Program Grant No: MI33P03850109 CFFP (Yes/ No): Replacement Housing Factor Grant No:				rri oi oi ant. 2	007	
Development Number	General Description of Major Work	Development	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work
Name/PHA-Wide Activities	Categories	Account No.						
				Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 1	A. Sand; patch; prime; paint soffits.	1460.0	68 ea.	3,900		1		
	B. Replace range/refrigerator.	1465.1	32 ea.					Moved CFP08.
CHALET TERRACE	C. Replace kitchen cabinets/countertop in	1470.0		3,500				
MI 38-001	management/maintenance area.							
1	D. Replace office countertop.	1470.0	I ea.	1,600				
	E. Scrape; prime; paint elderly ceilings.	1460.0	32 ea.	23,000				
	F. Correct grade for drainage.	1450.0	5 bldgs.	12,900				
	G. Replace interior doors; frames;	1460.0	360 ea.	102,706				·
	hardware; screens.							
	C-14-4-1 NT 20 001			171 600				
Scattered Sites	Subtotal MI 38-001		-	171,660				
MI 38-007	· ·			1				
26 3BR Units								
Ed JON Office	Subtotal MI 38-007 CT			0			1	
	Total AMP 1			171,660		1		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name:	Grant Capital	Type and Number Fund Program Grant N	lo: MI33P038501	09	Federal	FFY of Grant: 2	009		
Jackson Housing Commi	ssion CFFP (Replac	CFFP (Yes/ No): Replacement Housing Factor Grant No:							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 2	A. Replace vinyl wall base carpet areas.	1460.0	3,300 lf	7,400					
Reed Manor	B. Replace unit carpeting.	1460.0	575 sy	11,500					
MI 38-002	C. Replace range/refrigerator	1465.1	23 ea.	37,000					
	D. Install exterior surveillance system.	1470.0		5,660					
	Subtotal MI 38-002			61,560					
Reed Manor	A. Replace wall base 146 units.	1460.0	15,000 sf	34,000					
MI 38-003	B. Replace carpet 146 units.	1460.0	4,300 sy	108,000					
	C. Replace VCT 5 laundry rooms.	1470.0	1,300 sf	3,000	<u>                                     </u>				
	D. Replace VCT social; utility rooms.	1470.0	4,800 sf	11,000					
	E. Replace vinyl wall base laundry room		500 lf	1,100					
11.1000-100	F. Replace wall base trash; utility; social	1470.0	1,900 lf	4,300					
	rooms.			1				<u> </u>	
	G. Replace vinyl wall base corridors.	1470.0	5,200 lf	11,700					
	H. Replace carpeting corridors; social	1470.0	1,500 sy	30,000	ļ				
	I. Replace plastic laundry room sinks.	1470.0	9 ea.	4,500		-		ļ	
	J. Replace laundry room counter tops.	1470.0	9 ea.	4,500					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages		Tennet Ten	pe and Number			Fadaral	FFY of Grant: 2	nna		
PHA Name: Jackson Housing Commi	ission	Capital Fund Program Grant No: MI33P03850109 CFFP (Yes/ No): Replacement Housing Factor Grant No:				reueran				
Development Number Name/PHA-Wide Activities	General Description of Major Wo	'ork	Development Account No.	Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
	K. Install exterior surveillance syste	em.	1470.0		<u>34,690</u>					
	Subtotal MI 38-003				276,790					
Reed Manor	A. Replace VCT Laundry Rooms		1470.0	1,100 sf	2,500					
MI 38-004	B. Replace vinyl wall base laundry C. Replace laundry room sinks.	rooms	1470.0 1470.0	1,375 lf 6 ea.	3,000					
	D. Replace laundry counter tops.		1470.0	6ea.	3,000					
	E. Replace laundry vinyl wall cover F. Install exterior surveillance syste		1470.0 1470.0	9,900 sf	23,660 30,450					
	Subtotal MI 38-004				63,510					
	Total AMP 2				401,860					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:		Grant Ty Capital Fu	pe and Number and Program Grant No:	MI33P038501	09	Federal I	FFY of Grant: 20	09	
Jackson Housing	s Commission	CFFP (Ye Replacem	ent Housing Factor Gra	int No:					
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual (	Cost	Status of Work
Activities					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 3									
Shahan-Blackstone									
MI 38-005									
					<u></u>				
				!					
	Subtotal MI 38-005				0				
									•

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages									
PHA Name:  Jackson Housing Commis	sion	Capital F	ype and Number und Program Grant N es/ No): nent Housing Factor (		109	Federal l	FFY of Grant: 2	009	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual	Cost	Status of Work
					Original	Revised	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
Shahan-Blackstone									
MI 38-006									
					İ				
	Subtotal MI 38-006				0				
Scattered Sites									
MI 38-007									
14 3BR Units									
	Subtotal MI 38-007 SB	}			0				
	Total AMP 3				0				
	Total All AMPs:				549,521				

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages PHA Name:		Capital F	ype and Number und Program Grant N	o: MI33P038501	09	Federal	FFY of Grant: 2	009	
Jackson Housing Commi	ission	CFFP (Y Replacen	es/ No): nent Housing Factor (	Grant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work Development Account No.		Quantity	Total Estim	ated Cost	Total Actual	Cost	Status of Work
					Original	Revised 1	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
PHA Wide									
Operations	Provide funding routine PHA ope	erations	1406.0	12.14%	87,394				
Management			1408.0	2.12%	15,266				
Improvements			1410.0					<u>-</u>	
Administration									
A&E Fees	AMP 1-Chalet Terrace		1430.1		17,900				
& Costs	AMP 2-Reed Manor		1430.2		26,040				
	AMP 3-Shahan-Blackstone		1430.3		0				
	Total A& E Fees & Cos	ts		8.58%	41,780				
Contingency			1502.0						

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Development Number Name/PHA-Wide Activities  Original Obligation End Date PHA Wide O9/15/2011  AMP 1  O9/15/2011  AMP 2  O9/15/2011  AMP 3  O9/15/2011  O9/15/2011  O9/15/2013  AMP 3  O9/15/2011  O9/15/2013  AMP 3  O9/15/2011  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013  O9/15/2013	A Name: Jackson Housing	g Commission				Federal FFY of Grant: 2009
Obligation End Date		All Fund (Quarter I	d Obligated Ending Date)	All Fund (Quarter F	s Expended Ending Date)	Reasons for Revised Target Dates <sup>1</sup>
AMP 1 09/15/2011 09/15/2013  AMP 2 09/15/2011 09/15/2013  AMP 3 09/15/2011 09/15/2013		Obligation End				
AMP 2 09/15/2011 09/15/2013	PHA Wide	09/15/2011		09/15/2013		
AMP 3 09/15/2011 09/15/2013	AMP 1	09/15/2011		09/15/2013		
	AMP 2	09/15/2011		09/15/2013	·	
	AMP 3	09/15/2011		09/15/2013		

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

Summary					•
	Grant Type and Number Capital Fund Program Grant No: MI331 Replacement Housing Factor Grant No: Date of CFFP:	P03850107			FY of Grant: 2006 FY of Grant Approval: 2006
nal Annual Statement					
Summary by Development A	Account				Actual Cost 1
		Original	Revised <sup>2</sup>	Obligated	Expended
Total non-CFP Funds					
1406 Operations (may not exc	geed 20% of line 21) <sup>3</sup>	133,468	133,468	133,468	3 133,468
1408 Management Improvement	ents	19,134	11,650	11,650	10,080
1410 Administration (may not	t exceed 10% of line 21)				
1411 Audit					
, ,					
1430 Fees and Costs		40,290	40,290	40,290	40,290
1440 Site Acquisition					
1450 Site Improvement		43,746	24,030	24,030	)
1460 Dwelling Structures		444,520	471,720	471,720	161,415
1465.1 Dwelling Equipment—	-Nonexpendable				
1470 Non-dwelling Structures	S	5,900	5,900	5,900	)
1475 Non-dwelling Equipmer	nt				
1485 Demolition					
1492 Moving to Work Demor	nstration				
1495.1 Relocation Costs					
1499 Development Activities	4				
	Total non-CFP Funds  1406 Operations (may not exc. 1408 Management Improvem 1410 Administration (may not 1411 Audit 1415 Liquidated Damages 1430 Fees and Costs 1460 Dwelling Structures 1460 Dwelling Structures 1475 Non-dwelling Equipment 1475 Non-dwelling Equipment 1485 Demolition 1492 Moving to Work Demor	Housing Commission  Grant Type and Number Capital Fund Program Grant No: MI331 Replacement Housing Factor Grant No: Date of CFFP:  Grant Thal Annual Statement Total non-CFP Funds  1406 Operations (may not exceed 20% of line 21)  1410 Administration (may not exceed 10% of line 21)  1411 Audit  1415 Liquidated Damages  1430 Fees and Costs  1440 Site Acquisition  1450 Site Improvement  1465.1 Dwelling Equipment—Nonexpendable  1470 Non-dwelling Structures  1475 Non-dwelling Equipment  1485 Demolition  1492 Moving to Work Demonstration	Grant Type and Number Capital Fund Program Grant No: MI33P03850107 Replacement Housing Factor Grant No: Date of CFFP:  Grant Total Annual Statement Reserve for Disasters/Emergencies Tranace and Evaluation Report for Period Ending: 09/30/2008  Summary by Development Account  Total Est  Original  Total non-CFP Funds  1406 Operations (may not exceed 20% of line 21) 3  1408 Management Improvements  1410 Administration (may not exceed 10% of line 21)  1411 Audit  1415 Liquidated Damages  1430 Fees and Costs  40,290  1440 Site Acquisition  1450 Site Improvement  43,746  1460 Dwelling Structures  1465.1 Dwelling Equipment—Nonexpendable  1470 Non-dwelling Structures  5,900  1475 Non-dwelling Equipment  1485 Demolition  1492 Moving to Work Demonstration  1495.1 Relocation Costs	Grant Type and Number   Capital Fund Program Grant No: M133P03850107   Replacement Housing Factor Grant No: Date of CFFP:   Revised Annual Statement   Reserve for Disasters/Emergencies   Final Performance and Evaluation Report for Period Ending: 09/30/2008   Total Estimated Cost   Revised Statement   Total non-CFP Funds   Tota	February   Figure
Page1 form **HUD-50075.1** (4/2008)

 <sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
 <sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 <sup>3</sup> PhAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Part I: S	ummary					•
PHA Nam Jackson H Commissio	ousing	Grant Type and Number Capital Fund Program Grant No: MI33P03850108 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Gr FFY of Gr	ant: 2006 ant Approval: 2006	
□ Perform     □	al Annual S	Statement		☐ Final Perform	l Statement (revision no: 2) ance and Evaluation Report	
Line	Summary	y by Development Account	Total Estimate		Total Actual	
İ			Original	Revised <sup>2</sup>	Obligated	Expended
18a	1501 Coll	ateralization or Debt Service paid by the PHA				
18ba	9000 Coll	lateralization or Debt Service paid Via System of Direct Payment				
19	1502 Con	tingency (may not exceed 8% of line 20)				
20	Amount o	of Annual Grant:: (sum of lines 2 - 19)	687,058	687,058	687,058	345,253
21	Amount o	of line 20 Related to LBP Activities		·	,	•
22	Amount o	of line 20 Related to Section 504 Activities				
23	Amount o	of line 20 Related to Security - Soft Costs				
24	Amount o	of line 20 Related to Security - Hard Costs				
25	Amount o	of line 20 Related to Energy Conservation Measures				
Signatur	re of Exec	cutive Director: Phillip M. Fracker, PHM	Date 01/14/2009 Signature	of Public Housing Dir	ector	Date

Page2 form **HUD-50075.1** (4/2008)

 <sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report.
 <sup>2</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
 <sup>3</sup> PHAs with under 250 units in management may use 100% of CFP Grants for operations.

<sup>&</sup>lt;sup>4</sup> RHF funds shall be included here.

PHA Name:	Grant Capita	Type and Number Fund Program Grant N	No: MI33P038501	107	Federal l	FFY of Grant: 20	006	
Jackson Housing Commi		(Yes/ No): ement Housing Factor (	Grant No:					
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Work Development Account No. Quantity Total Estimated C		ated Cost	Total Actual (	Status of Work		
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
AMP 1	A. Trim and shape mature trees.	1450.0	30 ea.	19,716				Moved to FY08
	B. Landscape improvements.	1450.0	4,700 sf					Moved to FY08
CHALET TERRACE	C. Remove unused flower boxes and dire	. 1450.0	4 ea.	0				
MI 38-001	D. Correct grade to improve drainage	1450.0	5 bldgs.					
	E. Paint walls/ceilings all family units	1460.0	68 units.	75,000	75,000	75,000		
	F. Paint management/maintenance/comm	n. 1460.0	3 bldgs	4,400	4,400	4,400		
	G. Reapply seal coat; stripe parking lots.	. 1450.0	24,000 sf.					CFP 04/05.
	H. Convert units to HC accessible	1460.0	5 ea.					Move to future.
	I. Sand; patch; prime; paint ext. doors.	1460.0	200 ea.	15,000	15,000	15,000		
	J. Replace stair treads family units.	1460.0	68 ea.	23,000	23,000	23,000		
	K. Replace lavs; faucets; vanities elderly	1460.0	32 ea.		17,600	17,600		
	L. Replace toilets elderly units.	1460.0	32 ea.		9,600	9,600		
	M. Replace ceiling senior building.	1470.0	1 ea.					Completed.
	N. Replace light fixtures senior bldg.	1470.0						Completed.
Scattered Sites	O. Tuckpoint 5% brick fence.	1470.0						CFP 04/05
MI 38-007	Subtotal MI 38-001			137,916	145,400	145,400		
26 3BR Units								
	Subtotal MI 38-007-CT							
	Subtotal AMP 1			137,916	145,400	145,400		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Page3 form **HUD-50075.1** (4/2008)

 $<sup>^{\</sup>rm 2}$  To be completed for the Performance and Evaluation Report.

PHA Name:		<b>Type and Number</b> Fund Program Grant N	No: MI33P038501	107	Federal l	FFY of Grant: 20	06		
Jackson Housing Commi	ssion CFFP (	Yes/ No): ement Housing Factor (							
Development Number Name/PHA-Wide Activities	General Description of Major Work Categories	Development Account No. Quantity 7		Total Estima	Total Estimated Cost		Cost	Status of Work	
				Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 2	A. Mature tree trim; plantings	1450.0						Moved to FY08	
Reed Manor	B. Paint all unit walls; ceilings.	1460.0	23 ea.	66,200	66,200	66,200	66,200	Completed.	
MI 38-002	C. Replace laundry water softener	1470.0	1 ea.	1,500	<u>1,500</u>	1,500			
	Subtotal MI 38-002			62.590	60,310	60,310	66,200		
Reed Manor	A. Mature tree trim; plantings.	1450.0		12,750	12,750	12,750		Contract Award	
MI 38-003	B. Paint unit walls; ceilings.	1460.0	126 units	160,000	160,000	160,000		Contract Award	
	C. Clean; reseal; tuck point brick veneer	1460.0	6 bldgs.	51,720	51,720	51,720	51,720	CFP 04/05	
	all buildings.								
	Subtotal MI 38-003			224,020	224,020	224,020	51,720		

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Page4 form **HUD-50075.1** (4/2008)

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

Part II: Supporting Pages	1								
PHA Name:  Jackson Housing Commi		Capital F	ype and Number und Program Grant No es/No): nent Housing Factor G		08	Federal I	FFY of Grant: 20	06	
Development Number Name/PHA-Wide Activities			Development Account No.	1		Total Estimated Cost		Total Actual Cost	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
Reed Manor	A. Mature tree trim; plantings.		1450.0		11,280	11,280	11,280		
MI 38-004	B. Clean; reseal; tuck point brick	veneer	1460.0		53,250	53,250	53,250	43,945	CFP 04/05
	all buildings.								
	Subtotal MI 38-004				64,530	64,530	64,430	43,945	
						ĺ	,	ĺ	
	Subtotal AMP 2				356,250	356,250	356,250	161,415	
							-	_	-

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Jackson Housing Commission		Grant Type and Number Capital Fund Program Grant No:					Federal FFY of Grant: 2006			
		CFFP (Yes/ No): Replacement Housing Factor Grant No:								
Development Number General Description Name/PHA-Wide Categor Activities		Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual (	Cost	Status of Work	
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
AMP 3	A. Mature tree trim; plantings.		1450.0	10 ea.	8,500	8,500	8,500		Moved CFP 07	
Shahan-Blackstone										
MI 38-005										
	Subtotal MI 38-005									
					1					

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Page6 form **HUD-50075.1** (4/2008)

 $<sup>^{\</sup>rm 2}$  To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages	3								
PHA Name:  Jackson Housing Commis		CFFP (Ye	rpe and Number and Program Grant No es/ No): nent Housing Factor Gr		08	Federal 1	FFY of Grant: 20	006	
Development Number Name/PHA-Wide Activities	General Description of Major Categories	Work	Development Account No.	Quantity	Total Estima	ated Cost	Total Actual Cost		Status of Work
					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>	
Shahan-Blackstone	A. Mature tree trim; plantings.		1450.0				_	_	Moved CFP 07
MI 38-006	71 5								
	Subtotal MI 38-006								
Scattered Sites									
MI 38-007									
14 3BR Units									
	Subtotal MI 38-007 SB								
	Subtotal AMP 3								

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<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Part II: Supporting Pages	3									
PHA Name:  Jackson Housing Commission		Grant Type and Number Capital Fund Program Grant No: MI33P03850108 CFFP (Yes/ No): Replacement Housing Factor Grant No:				Federal I	Federal FFY of Grant: 2006			
Development Number Name/PHA-Wide Activities  General Description of Major Categories		Work Development Account No.		Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
Tectivities					Original	Revised <sup>1</sup>	Funds Obligated <sup>2</sup>	Funds Expended <sup>2</sup>		
PHA Wide										
Operations	Provide funding routine PHA ope	erations	1406.0		133,468	133,468	133,468	133,468	Completed.	
Management			1408.0		19,134	11,650	11,650	10,080		
Improvements			1410.0							
Administration			1410.0							
A&E Fees	AMP 1-Chalet Terrace		1430.1		18,830	18,830	18,830	18,830		
& Costs	AMP 2-Reed Manor		1430.2		20,230	20,230	20,230	20,230		
	AMP 3-Shahan-Blackstone		1430.3		1,230	1,230	1,230	1230		
	Subtotal A&E Fees & Cos	sts			40,290	40,290	40,290	40,290		
Contingency			1502.0							

<sup>&</sup>lt;sup>1</sup> To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

Page8 form **HUD-50075.1** (4/2008)

<sup>&</sup>lt;sup>2</sup> To be completed for the Performance and Evaluation Report.

Name: Jackson Housing	Federal FFY of Grant: 2006					
Development Number Name/PHA-Wide Activities	All Fund Obligated (Quarter Ending Date)			s Expended Ending Date)	Reasons for Revised Target Date	
	Original Obligation End Date	Actual Obligation End Date	Original Expenditure End Date	Actual Expenditure End Date		
PHA Wide	07/18/2008	05/31/2008	07/18/2010			
AMP 1	07/18/2008	05/31/2008	07/18/2010			
AMP 2	07/18/2008	05/31/2008	07/18/2010			
AMP 3	07/18/2008	05/31/2008	07/18/2010			

Page9 form **HUD-50075.1** (4/2008)

<sup>&</sup>lt;sup>1</sup> Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.